

Today, Rep. Pete Stark and several members of Congress introduced the Medicare Chronic Care Improvement Act of 2001, with companion legislation introduced in the Senate by Senator Jay Rockefeller. The bill would update and improve the Medicare health delivery system to better meet the needs of people with chronic health conditions.

“Although chronic conditions are America’s number one healthcare problem, the Medicare program is still designed around acute care needs,” Rep. Stark said. “We cannot deliver 21st century healthcare with a system that was designed a half-century ago. It’s time to update Medicare to help those who suffer from chronic illness.”

Senator Rockefeller stated, “This legislation provides a comprehensive solution to improving the quality of life and health for millions of Americans who are struggling with serious and disabling chronic conditions. It improves benefits for people with chronic conditions, it empowers providers to better care for patients, and it provides us with the research we need to better address chronic conditions in the future.”

Individuals with chronic illnesses represent the highest-cost, fastest-growing sector in healthcare, accounting for 90% of morbidity, 80% of deaths, and over 75% of national direct medical expenditures. Approximately 100 million Americans have chronic conditions. This number is expected to increase to 157 million – or half the population – by 2020. Chronic conditions are particularly prevalent among Medicare beneficiaries. About 80% of those age 65 and older have one chronic condition and two thirds have two or more chronic conditions. The numbers are even higher among women, 90% of whom have one or more chronic diseases.

The Medicare Chronic Care Improvement Act of 2001 would improve Medicare benefits, financing, and oversight structures for people with chronic conditions. Patient benefit packages would be updated to include increased access to preventive and wellness services. A new care coordination and assessment benefit would compensate physicians for time spent coordinating complex patient needs and teaching patients and their caregivers how to better manage their conditions. Medicare payment systems would be refined to better account for the additional costs of caring for people with chronic conditions. The bill also requires the Secretary of Health and Human Services to study chronic condition trends to develop more effective chronic condition care policies under the Medicare program.

The Medicare Chronic Care Improvement Act of 2001 is supported by a variety of health organizations representing consumers and providers. Supporting organizations include: the Chronic Care Association (including the American Association of Homes and Services for the

Aging, the American Geriatrics Society, the Catholic Health Association of the United States, Elderplan Social HMO, the National Chronic Care Consortium, the National Council on the Aging, and the National Family Caregivers Association), the National Depressive and Manic-Depressive Association, the Association for Ambulatory Behavioral Healthcare, the American Lung Association, the American Academy of Neurology, and the United Seniors Health Cooperative.

Rep. Stark concluded, “People with chronic conditions, like Alzheimer’s disease, arthritis, depression, or Parkinson’s disease, need a healthcare system which properly cares for their needs. This bill will improve Medicare’s ability to address the problems of chronic care patients. I look forward to working with my colleagues to move forward on this important measure.”